REQUEST FOR SPECIAL COMMITTED TO EDUCATION LICENSE PLATE

Please read the instructions on the back of this	s form and complete the information below.
Present the form to the Revenue Division, Spec	cial License Unit, when making application
for the special Committed to Education plate. addresses below.	You may apply in person or by mail at the

addresses below.				
	Name (of Vehicle Owner		
	Name	or veinere owner		
		Address		
City, State, Zip				
Vehicle Make	Vehicle Model	Vehicle Year	License Plate Number	
Apply by mail or in p	person at the following	addresses:		
By Mail		In Person		
Department of Finance and Administration Special License Unit P.O. Box 1272		Charles Ragland Taxpayer Services Center Special License Unit 1900 West 7 th Street Little Rock, Arkansas 72201		
Little Rock, AR 722	U3	Little Rock, Ar	Kansas /2201	

Signature Date